

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER:

0 4 — 0 4

2. STATE:

Maryland

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL
SECURITY ACT (MEDICAID)

Medicaid

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

July 1, 2003

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:

7. FEDERAL BUDGET IMPACT:

a. FFY 2003 \$ 0.00 184,647

b. FFY 2004 \$ 0.00 732,588

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Supplement 1 to Attachment 4.19-B
Page 3 (04-04)9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable):Supplement 1 to Attachment 4.19-B
Page 3 (92-11)

10. SUBJECT OF AMENDMENT:

This amendment clarifies how Medicaid handles Medicare coinsurance for outpatient
psychiatric services.

11. GOVERNOR'S REVIEW (Check One):

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL☒ OTHER, AS SPECIFIED:Susan J. Tucker, Executive Director
Office of Health Services

12. SIGNATURE OF STATE AGENCY OFFICIAL:

Nelson J. Sabatini

13. TYPED NAME:

Nelson J. Sabatini

14. TITLE:

Secretary

15. DATE SUBMITTED:

August 6, 2003

16. RETURN TO:

Susan J. Tucker, Executive Director
OHS - DHMH
201 W. Preston Street, Ste 124
Baltimore MD 21201

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:

August 7, 2003

18. DATE APPROVED:

NOV 03 2003

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:

July 1, 2003

20. SIGNATURE OF REGIONAL OFFICIAL:

Mary T. McSorley

21. TYPED NAME:

Mary T. McSorley

22. TITLE: Associate Regional Administrator
Division of Medicaid and Children's Health

23. REMARKS:

FEDERAL REGULATION CITATIONS:

Attachment 2.2 A	42 CFR 435.10
Attachment 2.6 A	42 CFR Part 435, Section 435.10 and Subparts G & H AT-78-90, AT-80-6, AT-80-34 1902(1) and (n) of the Act, P.L. 99-509 (Secs. 9401 and 9402), 1902(1) and (n) and 1920 of the Act, P.L. 99-509 (Secs. 9401, 9402, and 9407)
Attachment 3.1 A	Part 400, Subpart B and 1902(e)(5), 1905(a)(18) through (20), and 1920 of the Act, P.L. 99-272 (sections 9501, 9505 and 9526) and 1902(a), 1902(e)(47), 1902(e)(7) through (9), and 1920 of the Act, P.L. 99-509 (sections 9401(d), 9403, 9406 through 9408) and P.L. 99-514 (section 1895(c)(3))
Attachment 3.1 B	42 CFR Part 440, Subpart B, 42 CFR 441.15, AT-78-90, AT-80-34
Attachment 3.1 C	42 CFR 431.53, AT-78-90
Attachment 3.1 F	1905(a)(24) and 1930 of the Act, P.L. 101-508 (Section 4712 OIRA 90)
Attachment 4.18 A	447.51 through 447.58
Attachment 4.18 C	447.51 through 447.53
✓ Attachment 4.19 A & B	(a) 42 CFR 447.252, 45 FR 44964, 48 FR 56046, 50 FR 23009, 1902(e)(7) of the Act, P.L. 99-509 (section 9401(d)) (b) 42 CFR 447.201, 42 CFR 447.302, AT-78-90, AT-80-34, 1903(a)(1) and (n) and 1920 of the Act, P.L. 99-509 (Section 9403, 9406 and 9407), 52 FR 28648
Attachment 4.16	42 CFR 431.615(c) AT-78-90
Attachment 4.19 D	(d) 42 CFR 447.252, 47 FR 47954, 48 FR 56046, 42 CFR 447.280, 47 FR 31513, 52 FR 28141
Attachment 4.22 A	(a) 433.137(a), 50 FR 46652, 55 FR 1423
Attachment 4.22 B	(b) 433.138(f), 52 FR 5967, 433.138(g)(1)(ii) and (2)(ii), 52 FR 5967, 433.133(g)(3)(i) and (iii), 52 FR 5967, 433.133(h)(4)(i) through (iii), 52 FR 5967
Attachment 4.22 C	Section 1906 of the Act
Attachment 4.26	1927(g) 42 CFR 456.700, 1927(g)(1)(A), 1927(g)(1)(a) 42 CFR 456.705(b) and 456.709(b), 1927(g)(1)(B) 42 CFR 456.703(d) and (E), 1927(g)(1)(D) 42 CFR 456.703(b), 1927(g)(2)(A) 42 CFR 456.705(b), 1927(g)(2)(A)(i) 42 CFR 456.705(b), 1927(g)(2)(A)(i) 42 CFR 456.705(b), (1)-(7), 1927(g)(2)(A)(ii) 42 CFR 456.705(c) and (d), 1927(g)(2)(B) 42 CFR 456.709(a), 1927(g)(2)(C) 42 CFR 456.709(b), 1927(g)(2)(D) 42 CFR 456.711, 1927(g)(3)(A) 42 CFR 456.716(a), 1927(g)(3)(B) 42 CFR 456.716 (A) and (B), 1927(g)(3)(C) 42 CFR 456.716(d) 1927(g)(3)(C) 42 CFR 456.711 (a)-(d), 1927(g)(3)(D) 42 CFR 456.712 (A) and (B), 1927(h)(1) 42 CFR 456.722, 1927(g)(2)(A)(i) 42 CFR 456.705(b), 1927(j)(2) 42 CFR 456.703(c)
Attachment 4.32 A	(a) 435.940 through 435.960, 52 FR 5967
Attachment 4.33 A	(a) 1902(a)(48) of the Act, P.L. 99-570 (Section 11005), P.L. 100-93 (Section 5(a)(3))
Attachment 4.35 A	(a) 1919(h)(1) and (2) of the Act, P.L. 100-203 (Section 4212(a))
Attachment 4.35 B	(b) Same as above

Revision: HCFA-PM-91-4 (BPD) Supplement 1 to ATTACHMENT 4.19-B
AUGUST 1991 Page 3
OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Maryland

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -
OTHER TYPES OF CARE

Payment of Medicare Part A and Part B Deductible/Coinsurance

Item 1 - For all dual Medicare and full Medicaid covered individuals (note: does not apply to QMB-only), the coinsurance payment for outpatient psychiatric services is the Medicare allowable amount, including any amount normally withheld as a psychiatric exclusion, less the amount paid by Medicare. The deductible payment will be the deductible amount determined by Medicare.

TN No. 04-04 Approval Date **NOV 03 2003** Effective Date JUL 1, 2003

Supercedes

TN No. 92-11

HCFA ID: 7982E